



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

<i>In re</i> application of:)	
Kazuhito GASSHO et al.)	Docket No. MIPFP051
Application No. 09/988,038)	Examiner: M. Robinson
Filed: November 16, 2001)	Group Art Unit: 2625
For: PRINT JOB MANAGEMENT)	Date: October 31, 2006
APPARATUS)	Confirmation No. 7949

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on October 31, 2006.

Signed: _____

Diane Schwanbeck

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Applicants submit this paper in response to the Office Action dated July 31, 2006.

Please amend this application as follows:

The **Amendments to the Claims** made herein are reflected in the **Listing of Claims**, which begins on page 2 of this paper.

Applicants' **Remarks** begin on page 4 of this paper.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Kazuhito GASSHO et al.

Application No. 09/988,038

Filed: November 16, 2001

For: PRINT JOB MANAGEMENT APPARATUS



Attorney Docket No. MIPFP051

Examiner: M. Robinson

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Signed:

Diane Schwanbeck

Commissioner for Patents
Alexandria, VA 22313-1450

Sir:

Applicants hereby transmit an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining After Amendment	Highest Previously Paid For	Present Extra	SMALL ENTITY RATE FEE	OR	LARGE ENTITY RATE FEE
TOTAL CLAIMS	04 -	20	00	X 25 = \$	OR	X 50 = \$
INDEP CLAIMS	04 -	08	00	X100 = \$	OR	X200 = \$
			TOTAL	\$		\$0

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Applicants hereby petition for a ____-month extension of time to respond to the Office Action. Applicants believe that no extension of time is required; however, if it is determined that such an extension is required, Applicants hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an extension of time under 37 CFR 1.136 to Deposit Account No. 50-0805 (Order No. MIPFP051).

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Enclosed is our Check No. ____ in the amount of \$____ to cover the extension of time fees. If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-0805 (Order No. MIPFP051).

Respectfully submitted,
MARTINE PENILLA & GENCARELLA, LLP

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